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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	AT	ORNEY DOCKET NO.	CONFIRMATION NO.
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EXAMINER		ART UNIT	CLASS-SUBCLASS	01 FC:1501 1510.00 DA		
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CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternati (2) the name of a singl registered attorney or 2 registered patent atto listed, no name will be	Is so fup to 3 registered patent attorneys R, alternatively, e of a single firm (having as a member a attorney or agent) and the names of up to patent attorneys or agents. If no name is ame will be printed.  Schmerser, Orsen a Watts; William H.  Steinberg		
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI Internati	less an assignee is ident thin 37 CFR 3.11. Com GNEE Onal Business	ified below, no assignee pletion of this form is NO	(B) RESIDENCE: (CITY oration, Armon	eatent. If an assignee is assignment.  Y and STATE OR COU  k, NY	NTRY)	ocument has been filed for
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	s SMALL ENTITY state	us. See 37 CFR 1.27.	☐ b. Applicant is no lon	nger claiming SMALL I	INTITY status. See 37 C	
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